

CARD MUST BE TYPED

State of Kansas  
**NOTICE OF INTENTION TO DRILL**  
(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: ...July. 15, 1985.....  
month day year

API Number 15- 095-21,535-0000

OPERATOR: License # 5348.....

SW .. NW .. SE .. Sec 24. Twp 28 .. S, Rge 7...  East  
(location)  West

Name Robert E. Campbell.....

Address 260 N. Rock Road, Suite 110.....

City/State/Zip Wichita, KS 67206.....

Contact Person Robert E. Campbell.....

Phone (316) 685-6001.....

1650 ..... Ft North from Southeast Corner of Section  
2310 ..... Ft West from Southeast Corner of Section  
(Note: Locate well on Section Plat on reverse slide)

CONTRACTOR: License # 5107.....

Nearest lease or unit boundary line ..... 1650 ..... feet.

Name H-30, Inc.....

County Kingman.....

City/State Wichita, KS.....

Lease Name Messenger..... Well# 2.....

Well Drilled For: Well Class: Type Equipment:

- |   |                               |   |  |
|---|-------------------------------|---|--|
| <input type="checkbox"/> Oil            | <input type="checkbox"/> Swd  | <input type="checkbox"/> Infield              | <input checked="" type="checkbox"/> Mud Rotary |
| <input checked="" type="checkbox"/> Gas | <input type="checkbox"/> Inj  | <input checked="" type="checkbox"/> Pool Ext. | <input type="checkbox"/> Air Rotary            |
| <input type="checkbox"/> OWWO           | <input type="checkbox"/> Expl | <input type="checkbox"/> Wildcat              | <input type="checkbox"/> Cable                 |

- Domestic well within 330 feet :  yes  no  
Municipal well within one mile :  yes  no

If OWWO: old well info as follows:

Operator .....

Well Name .....

Comp Date ..... Old Total Depth .....

Projected Total Depth ..... 2150 ..... feet

Projected Formation at TD Indian Cave.....

Expected Producing Formations Indian Cave.....

Depth to Bottom of fresh water ..... 100 ..... feet

Lowest usable water formation .. Harper Sandstone.....

Depth to Bottom of usable water ..... 200 ..... feet

Surface pipe by Alternate : 1  2

Surface pipe to be set ..... 225± ..... feet

Conductor pipe if any required ..... feet

Ground surface elevation ..... 1585 ..... feet MSL

This Authorization Expires ..... 1-3-86 .....

Approved By ..... 7-3-85 ..... *Rc*

I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date 7-3-85..... Signature of Operator or Agent

*Diane Rebert* Title *agent*

*Rc H Sorkone*

